

Role Code: 19013  
Role Title: Administrative and Office Specialist III  
Working Title: Senior Fiscal Technician  
Agency: 00157 Compensation Board  
Loc: 760 Richmond (City)  
SOC: 23413  
Position: 00011

Band: 3  
Open To: General Public  
Hiring Range: \$22,188 to \$40,000  
Application: State Form 10-12 Required

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Application Closing Date: May 12, 2006

The Compensation Board is seeking an experienced individual to work in the Customer Service section that will serve as the primary contact between the Compensation Board and assigned Sheriffs and Regional Jails Superintendents and their employees. Incumbent must be able to provide assistance via telephone and process monthly payroll and expense reimbursements through COIN (Constitutional Officer Information Network); submit invoices and transmit for payment to Constituents via CARS (Commonwealth Accounting Reporting System). Incumbent will be responsible for ensuring personnel changes for constituents are within Compensation Board policy; providing written analysis to the Assistant Executive Secretary and the Board on budget amendments requested by constituents and preparing the related monthly docket. Incumbent will assist constituents in completion of annual budget requests and provide instruction in the use of COIN. Makes presentations on job related topics at designated conferences. Incumbent must demonstrate a positive customer service attitude in the performance of all duties; and a cooperative teamwork approach in all staff interaction.

#### Qualifications:

Accounting experience preferred. Ability to perform detailed work with numeric data, to make arithmetical calculations rapidly and accurately required. Working experience preparing financial reports and statements utilizing Excel and Word software applications is required. Working experience preparing financial reports, statements and presentation utilizing automated systems, Access and PowerPoint is preferred. Ability to communicate effectively, both orally and in writing required. Experience in dealing with multiple priorities and frequent deadlines is preferred. Experience with customer service required. An Associate or Bachelors degree in business or accounting preferred. High school diploma or GED required. Some overnight travel required. Valid Virginia motor vehicle operators license required. A Virginia State Police criminal records check will be conducted upon employment.

An Equal Opportunity Employer

## WORK DESCRIPTION/PERFORMANCE PLAN

<b>PART I – Position Identification Information</b>	
1. Position Number: 00011	2. Agency Name & Code; Division/Department: Compensation Board #00157
3. Location Code and Work Location Code: #760-Richmond	4. Occupational Family & Career Group: Administrative Services Adm. & Program Support
5. Role Title & Code: Administrative & Program Specialist III 19013	6. Pay Band: 3
7. Work Title: Senior Fiscal Technician	8. SOC Title & Code: Fiscal Technician Senior 23413
9. Level Indicator: <input checked="" type="checkbox"/> Employee <input type="checkbox"/> Supervisor <input type="checkbox"/> Manager	10. FLSA Status: <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Non-Exempt
11. Supervisor's Position Number: 00013	12. Supervisor's Role Title & Code: General Administration Practitioner II 19052
13. EEO Code: E	14. Date: May 1 - October 31, 2006

<b>PART II – Work Description &amp; Performance Plan</b>
<p>15. Organizational Objective: The mission of the Compensation Board is to determine a reasonable budget for the participation of the Commonwealth toward the total cost of office operations for Constitutional Officers, and to assist those Officers and their staff through automation, training and other means, to improve efficiencies and to enhance the level of services provided to the citizens of Virginia.</p>
<p>16. Purpose of Position: Serves as the primary contact between the Compensation Board and assigned constituency group(s) and their employees. Provides customer service to these constituents by providing information, process reimbursements, and resolving reimbursement discrepancies.</p>
<p>17. KSA's and or Competencies required to successfully perform the work (attach Competency Model, if applicable): Demonstrated customer service skills. Working knowledge of basic bookkeeping/accounting principles. Ability to perform detailed work with numeric data to make arithmetical calculations rapidly and accurately. Knowledge and ability to prepare financial reports and statements through automated systems. Knowledge and ability to use personal computer and associated software(e.g., Word, Excel, Access). Ability to communicate effectively, both orally and in writing. Ability to develop technical data to be presented by others to large audiences. Demonstrated ability to interpret and apply policies/criteria to a variety of requests.</p>
<p>18. Education, Experience, Licensure, Certification required for entry into position: Graduation from high school program which included, or was supplemented, by basic bookkeeping/accounting courses and related training. Previous accounting/bookkeeping experience. Experience with PC's with knowledge of Excel, Access, and Word preferred. Experience with customer service.</p>



19. Core Responsibilities	20. Measures for Core Responsibilities
<p>A. Performance Management (for employees who supervise others) <b>Managers, see existing PD</b></p>	<p><b>Examples of Measures for Performance Management:</b></p> <ul style="list-style-type: none"> <li>• Expectations are clear, well communicated, and relate to the goals and objectives of the department or unit;</li> <li>• Staff receive frequent, constructive feedback, including interim evaluations as appropriate;</li> <li>• Staff have the necessary knowledge, skills, and abilities to accomplish goals;</li> <li>• The requirements of the performance planning and evaluation system are met and evaluations are completed by established deadlines with proper documentation;</li> <li>• Performance issues are addressed and documented as they occur.</li> <li>• Safety issues are reviewed and communicated to assure a safe and healthy workplace.</li> </ul>
<p>B. Provides assistance to constituents and their employees, primarily via telephone, in processing monthly payrolls and expenses through the Constitutional Officer Information Network (COIN) reimbursement systems. Answers constituent inquiries about payrolls, personnel changes, docket information, Officer's and deputies Career Development programs, etc. Inputs data regarding new positions, additional allowances, and other Board-approved actions COIN. Verifies the number of positions, approved salaries, and fringe benefits, and reconciles requested expense reimbursements and employees with supporting documentation and CB authorization. Verifies changes in position count and the on-line personnel form CB-10). Verifies that unexpended funds are available from which to draw reimbursements. Disallows claims not reimbursable by the State and contacts localities when questions arise. Coordinates error correction for constituents either by making the correction personally, through phone calls to their offices, a letter requesting the overpayment of funds or through training sessions. Provides monthly COIN training as required.</p>	<p><b>Managers, verify responsibilities and determine measures; should be the same measures for the same roles</b></p> <p>Customer Service Survey reflects at least a 90% timely response to constituent inquiries</p> <p>Reimbursements to constituents are validated for accuracy, within Compensation Board policy and are processed within the current month.</p> <p>Officer and/or Administrators are contacted for completion of reimbursement within two days after prescribed certification deadline.</p> <p>Update all systems within two workdays of changes approved by the Compensation Board on a monthly basis and/or before the Reimbursement is made available to constituent.</p>
<p>C. Approves and submits invoices for transmittal to CARS for payment to Constituents. Verification of the payment invoices to the reimbursement system. Updates SCB control log when invoices are submitted and received and posts batches the SCB control log once they are transmitted to CARS.</p>	<p>Approval and submission of invoices for transmittal of payment to officers completed on a daily basis.</p>

<p>D. Verifies and posts personnel changes in constituents' offices including approving salary offers at the first step of the salary range. Audits promotional increases based on CB policies and Verifies that money is available for the position(s). Provides written analysis and recommendations to the Asst. Ex. Sec. for approval. Forwards any personnel requests that are outside of approved CB policies for approval by the Compensation Board. Approves and post pending fund transfers within policy as requested by officer. Forwards fund transfers outside of approved Compensation Policy for approval by the Board.</p>	<p>Ensures CB10s entered are accurate and are within Compensation Board policy and that funds are available.</p> <p>Monitors Fund Transfer files for potential docket submission within prescribed timelines.</p> <p>Verifies and post CB-10s (personnel changes) and Fund Transfers to the current budget prior to the reimbursement cycle.</p> <p>Monitors vacancy savings/turnover on a monthly basis, ensuring screens do not reflect a negative balance or appear accurate..</p>
<p>E. Provides docket information to the Asst. Ex. Sec. and the Board on constituent budget for transfer/increase requests by preparing the related monthly docket. Provides analysis on the requests after reviewing the constituent's rationale for the requests are within Compensation Board policy. Makes recommendations to the Asst. Ex. Sec. For action.</p>	<p>Prepares docket submissions with accuracy and in compliance with Compensation Board policy. Analysis, recommendation, and back up documentation are submitted within 5 days of receipt of request or by docket cutoff whichever comes first. .</p> <p>Docket approvals are updated to the Compensation Board database prior to the reimbursement cycle.</p> <p>.</p>
<p>F. Assist Officers in completion of budget certification through instruction of system Assist and/or conducts Online Budget training as needed. Contact Officers not certified within prescribed timeline.</p> <p>Reviews all annual budget submissions by constituents for completeness, accuracy, and compliance with CB policy. Requests additional information from constituents as needed. Verifies data in the CB on-line budget system utilizing Excel and access spreadsheets. Utilizing e-mail, brings any unusual requests to the attention of the Asst. Ex. Sec. Conducts analysis of Percent of Need as Related to Staffing Standards.</p>	<p>Annually assists and/or conducts online budget training and ongoing training via telephone or as requested by officer. Contacts all Officers not certifying the online budget within on day of prescribed timeline.</p> <p>Budget requests submitted by constituents are validated for accuracy, within Compensation Board policy and are marked in process within the budget workplan timeline.</p> <p>Base budget changes are updated in the Online Budget as approved by Compensation Board during monthly Board meetings.</p> <p>Conducts percent of Need as related to Staffing Standards within the budget workplan timeline.</p>
<p>G. Demonstrates a positive customer service attitude in the performance of all duties, demonstrates a cooperative teamwork approach in all staff interaction.</p> <p>Performs other duties as assigned.</p>	<p>Provides back-up support to other Senior Fiscal Technicians and Administrative staff in the office as necessary. Maintains effective working relationship with all co-workers, Constitutional Officers and the public on a daily basis.</p>

**Optional**

23. Agency/Departmental Objectives	24. Measures for Agency/Departmental Objectives
H. Managers: fill in as wanted	
I.	
J.	
K.	

**COMPENSATION BOARD**

**ROLE CODE # 19013**

**PART III – Employee Development Plan CONFIDENTIAL Attach separately to each employee's EWP**

**25. Personal Learning Goals**

**26. Learning Steps/Resource Needs**

**Part IV - Review of Work Description/Performance Plan**

27. Employee's Comments:

Signature:

Date:

Print Name:

SSN:

28. Supervisor's Comments:

Signature:

Date:

Print Name:

SSN:

29. Reviewer's Comments:

Signature:

Date:

Print Name:

SSN:

## EMPLOYEE WORK PROFILE – AGENCY OPTIONAL SECTIONS

### Agency Employment Agreement

I acknowledge and understand that I may have access to confidential business information belonging to the Compensation Board. Therefore, except as required by law, I agree that I will not:

- Access data that is unrelated to my job duties.
- Access and/or disclose to any other person, or allow any other person access to, any confidential information. Disclosure of information includes, but is not limited to, verbal discussions, FAX transmissions, electronic mail messages, voice mail communication, written documentation, "loaning" computer access codes, and/or another transmission or sharing of data.
- Access to the Internet is for legitimate business-related purposes ONLY.
- Business use is defined in great part by job duties and responsibilities.
- Monitoring of sites visited may be performed on a routine basis.
- Any employee violating any of the above policies may be subject to appropriate disciplinary action.

**I understand that violations of this agreement may result in disciplinary action, up to and including, my termination of employment.**

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

### Annual Requirements:

### Physical/Cognitive Requirements (Indicate by each E = Essential, M = marginal, or N/A)

The ability to lift and move packages weighing up to 50 pounds; and to push, pull, reach, climb, bend, and perform repetitive motion.





# **EMPLOYEE WORK PROFILE** **PERFORMANCE EVALUATION**

*Parts V, VI,  
 VII, VIII, and  
 IX are written*

The following pages are printed separate from the remainder of the EWP because they contain confidential employee information.

## **PART V – Position Identification Information**

30. Position Number: 00011	31. Agency Name & Code; Division/Department: Compensation Board #00157
32. Employee Name:	33. Employee ID Number:

## **PART VI – Performance Evaluation**

34. Core Responsibilities - Rating Earned	35. Core Responsibilities - Comments on Results Achieved
<b>A.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>B.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>C.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>D.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>E.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>F.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>G.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	

<b>36. Special Assignments - Rating Earned</b>	<b>37. Special Assignments - Comments on Results Achieved</b>
<b>H.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	

<b>38. Agency/Department Objectives - Rating Earned</b>	<b>39. Agency/Department Objectives - Comments on Results Achieved</b>
<b>I.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>J.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>K.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	
<b>L.</b> <input type="checkbox"/> Extraordinary Contributor <input type="checkbox"/> Contributor <input type="checkbox"/> Below Contributor	

**40. Other significant results for the performance cycle:**

**Part VII - Employee Development Results**

**41. Year-end Learning Accomplishments:**

**Part VIII - Overall Results Assessment and Rating Earned**

An employee must receive at least one Performance Management Need Improvement/Substandard Performance form during the performance cycle in order to be eligible for an overall "Below Contributor" rating during the same performance cycle.

An employee who earns an overall rating of "Below Contributor" must be reviewed again within three months.

An employee must receive at least one Acknowledgment of Extraordinary Contribution form during the performance cycle in order to be eligible for an overall "Extraordinary Contributor" rating during the same performance cycle. However, the receipt of an Acknowledgment of Extraordinary Contribution form does not guarantee an overall performance rating of "Extraordinary Contributor" for that performance cycle.

**42. Overall Rating Earned**

- ☐ Extraordinary Contributor
- ☐ Contributor
- ☐ Below Contributor

Part IX - Review of Performance Evaluation		
43. Supervisor's Comments:  .	Signature:  Print Name:  SSN:	Date:
44. Reviewer's Comments:	Signature:  Print Name:  SSN	Date:
45. Employee's Comments:	Signature:  Print Name:  SSN:	Date:



## ATTACHMENT C

### Interim Evaluation Form

Employee Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Meeting Date: \_\_\_\_\_

<b>Performance Areas Fully Meeting Job Criteria or Job Responsibilities</b>
<b>Performance Areas Identified for Improvement/Substandard</b>
<b>Additional Discussion Items</b> (e.g., project updates, progress on priorities, training and professional development, employee's concerns)
<b>Next Steps in Employee Development</b> (for both the supervisor and employee)

Employee's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>Probationary Progress Review</b>			
Projected Probationary End Date:			
<b>Review Interval:</b> <input type="checkbox"/> 3-month <input type="checkbox"/> 6-month <input type="checkbox"/> Probationary Period End <input type="checkbox"/> Other:			
Employee Name (Last, First, Middle)			Employee ID Number
Position Number	Role Title		Working Title
Agency		Sub-Division	
Employment Date	Supervisor's Name	Supervisor's Title	
<b>Comments on Overall Progress</b> (Attachments may be added if necessary. Indicate # of attachments here: ____)  <div style="height: 150px; border: 1px solid black;"></div>			
<b>Overall Results of Review</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Contributor   <input type="checkbox"/> Below Contributor         </div> <div style="width: 70%;">           Performance shows consistent achievement toward meeting established performance expectations.             Performance shows deficiencies which interfere with the attainment of performance expectations.         </div> </div>			

<b>Employee Development Plan</b>	
Personal Learning Goals	Learning Steps/Resource Needs
	Excel – Level 3 Effective Presentations Access 1 & 2

<b>Comments On Review</b>	
Supervisor's Signature:	Date:
Employee's Signature:	Date:

